

6-8-2020

(18-20214)

Honorable Paul Berman

To whom it may concern i am jacquell Oued
a federal prisoner currently serving forty
months at milan correctional facility my
inmate number is # 56424039 i have currently
served 50% of the time i was sentenced
to. I am writing you this letter asking for
your approval of the covid 19 release that
is being granted to prisoners due to chronic
health illness. At this moment i have not
received any staff or disciplinary actions due
to my behavior at the institution. While being
incarcerated i have completed an forty hour
non residential drug treatment program which
i asked for upon sentencing to help me cope
with my substance abuse. also i am enrolled
in the 500 hour residential treatment program
currently i am 85 percent finished with this
nine month program due to the covid 19 pandemic
my completion of this class has been postponed
until further notice, also i have maintained
an institutional job the whole time i have been
here i consider myself as a role model inmate.
My underlined health issues are. high blood
pressure which i take three different medications
for daily, the institution has diagnosed me
with diabetes, also i have Sleep Apnea which
i sleep with a breathing machine every night
to supply me with more oxygen. also i have
bullet fragments in my back from when i was
shot the institution that they supply cause
me severe pain to my lower back i have spine

With medical staff about this on numerous occasions but no medical attention has been showed to me everytime i explain this problem all they can tell me is that its nothing that they can do i have followed the proper procedure in filing the paper work so they can at least review my case but all of them have been denied stating that i meet all the criteria except that my pattern score is a medium stated by M. SURZYAK on 5-27-20 who is the unit manager where i have been placed. its very hard to get in contact with him for any questions or information that i may have concerning my situation. when i do get a chance to speak with him he is very rude and unwilling to provide my request by saying they will be denied or he simply isnt dealing with what im asking on that particular day. due to the outbreak of Covid 19 at this facility i was placed in solitary confinement for eight days under the assumption that i had Covid 19 during this time i was placed in a room that wasnt cleaned out or disinfected there was dead raccoons, dogs, and human feces present during my stay i brought this to staff attention and all they could tell me was they are figuring it out. also i was next tested to see if i had contracted the disease or not, the only medical attention i received was a temperature check twice a day and a blood pressure check once a day. my parents called this prison when they did not hear from me they told them how saying i was still being housed in general

population which was not true at all. There has been 125 confirmed cases of COVID 19 at this location and also 5 deaths. One of the deceased was a family member name Willie Petersen who also suffered from underlying health issues. I feel here in a good candidate to be considered for home confinement for the duration of my time left because if I contract the disease my chances are more fatal than the next person can be also currently it is time for me to be put in for halburg house to be released back into society I have a residence to reside at if this is granted for me also have job as well I just would like these things to be considered when making your decision thanks alot for your time to hear me out.

BP-S148.055 INMATE REQUEST TO STAFF CDFRM

SEP 98

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

TO: (Name and Title of Staff Member) <i>Jurczak Unit Manager</i>	DATE: <i>5-27-20</i>
FROM: <i>Owens</i>	REGISTER NO.: <i>56424039</i>
WORK ASSIGNMENT: <i>Ordly</i>	UNIT: <i>G</i>

SUBJECT: (Briefly state your question or concern and the solution you are requesting. Continue on back, if necessary. Your failure to be specific may result in no action being taken. If necessary, you will be interviewed in order to successfully respond to your request.)

I currently have served 47 Percent of my time I have not received any shots or disciplinary actions I have high blood pressure, also I am an diabetic I have been confined already due to this environment if I come in contact with Covid-19 I have a higher chance of dying than a healthy person also my mom is getting of age and she is not in the best health she also takes care of my three year old son. I have a residence that I can live in upon release if I'm granted my request its currently time for me to be put in for halfway house please take this into consideration ALSO I was diagnosed with PTSD and havent talked to anyone

(Do not write below this line)

Disposited for that at all in no kind way

YOU DO NOT MEET THE CRITERIA FOR THE INDICATED REASONS:

Your pattern score is Medium.

Signature Staff Member

Date


6/1/2020

Record Copy - File; Copy - Inmate
(This form may be replicated via WP)

This form replaces BP-148.070 dated Oct 86
and BP-S148.070 APR 94

Jacqueline Owens

NAME

56424039

REG. NO.

FEDERAL CORRECTIONAL INSTITUTION

P.O. BOX 1000

MILAN, MICHIGAN 48160

METROPLEX MI 480

09 JUN 2020 AM 3 L

6/9/20



Theodore Levin on Michigan State Court House

231 West LaSalle Street
Detroit Michigan 48226

48226

06/11

